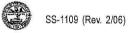
R

CAMPAIGN FINANCIAL DISCLOSURE STATEMENT

For State and Local Candidates **For Single-Candidate Committees**

| 1 D | DATE OF BEDORT | 2.2 NAME OF C | ANDIDATE OR COMMITTEE | | | | | | |
|---|---|--------------------------------------|-----------------------------|--------------------------------|-------------------------|--|--|--|--|
| 1. D. | 1. DATE OF REPORT 2.a. NAME OF CANDIDATE OR COMMITTEE | | | | | | | | |
| | 1-15-2009 | CARL | E LEVI | T | | | | | |
| 2.b. II | IF COMMITTEE, NAME OF CANDIDATE | | | 3. ELECTION DATE | | | | | |
| | | | | 5-2-20 | 06 | | | | |
| | CAMPAIGN ADDRESS AND PHONE Street or Rural Route | City | State | Zip Code | Phone | | | | |
| 6 | ASI EAST FOURTL ST | # 305 CH | ATTANOVEA TN | 37403 (423) 75 | 52-0001 | | | | |
| 4.b. C | CANDIDATE'S HOME ADDRESS (if different Street or Rural Route | than 4.a.) City | State | Zip Code | Phone | | | | |
| 36. | 28 GLENDON DR CA | HATTANOUGA | TN | 37403 (423) 6 | | | | | |
| | DFFICE SOUGHT (include district number, if | SOME WALL PRODUCED RECOVERED COMPANY | 6. NAME OF POLITICA | AL TREASURER (may be c | andidate) | | | | |
| HA | AMILTON COUNTY TRUSTS | £ | JUSSPH C L | IVINGSTON, J. | n EA | | | | |
| 7. C | CATEGORY OR REPORT (Check one) | | | | | | | | |
| | FIRST SECOND THIRD | FOURTH | PRE- PRE- | L_I MID-YEAR | YEAR-END | | | | |
| | QUARTER QUARTER QUARTER BEGINNING DATE OF REPORTING PERIOD | QUARTER | PRIMARY GENERA | | SUPPLEMENTAL | | | | |
| o.a. b | | | 8.b. ENDING DATE OF RE | | | | | | |
| 0 (0: | 7-1-2008 | | 1-13 | -2009 | | | | | |
| 9. (Ch | neck one) | | | | 1 | | | | |
| a. | a. This campaign is exempt from detailed disclosure because contributions (including in-kind) received total \$1,000 or less AND expenditures total \$1,000 or less for this reporting period. (Complete items 12d., 12e. and 12f.) | | | | | | | | |
| h | o. This campaign is required to file a det | ailed financial discle | osuro bosquas contributions | (including in blad) assists | d total # 04 000 | | | | |
| | and/or expenditures total more than \$ | 1,000 for this report | ing period. | s (including in-kind) received | total more than \$1,000 | | | | |
| 10. I/we do solemnly swear or affirm that the information contained in this campaign financial disclosure report is true and that this report is an accurate accounting of campaign contributions and expenditures required to be reported by the candidate committee by the Campaign Financial Disclosure Act. Additionally, I/we swear or affirm that no campaign contributions have been expended for the personal financial benefit of the candidate or for any other nonpolitical purpose as defined by the federal internal revenue code. | | | | | | | | | |
| 11. V | WITNESS SIGNATURE | | | | | | | | |
| | Y May | 111 | | 00 1 | 1 21 4 | | | | |
| _ | suns y atter | 117/09 | Dai | Dy My | 1-31-09 | | | | |
| | signature of witness | ɗate | siç | gnature of witness | date | | | | |
| 12. S | SUMMARY | E. | | | 1 | | | | |
| a | a. BALANCE ON HAND LAST REPORT | | | () | | | | | |
| b. | o. TOTAL RECEIPTS THIS PERIOD | | | \$585 | | | | | |
| c. | . TOTAL DISBURSEMENTS THIS PERIOD . | | | \$ ———— | | | | | |
| d. | I. BALANCE ON HAND (12.a. plus 12.b. m | ninus 12.c.) | | \$ | 31 346 | | | | |
| е. | 2. TOTAL LOANS OUTSTANDING | 14:21 | 2009 FEB - 2 PM | \$ | 25,000 | | | | |
| f. | TOTAL OBLIGATIONS OUTSTANDING | N- | OISSIMMOJ | \$ | | | | | |
| | | .0. | HOTJIMAIL | | | | | | |



Page 1 of _______ RDA 1159

SUMMARY PAGE - CANDIDATE

| 13. NAME OF CANDIDATE OR COMMITTEE (In Full) | 14. REPORT COVERING THE PERIOD | | | | | | |
|--|--|--|--|--|--|--|--|
| CARL E LEVE | FROM: 7-1-08 TO: 1-15-09 | | | | | | |
| RECEIPTS 15. CONTRIBUTIONS (other than loans and interest) | | | | | | | |
| a. Unitemized Contributions (\$100 or less from each source this period) | \$ | | | | | | |
| b. Itemized Contributions (over \$100 from each source this period) | \$ | | | | | | |
| c. TOTAL CONTRIBUTIONS (other than loans and interest)(add 15.a. and 15.b.) | \$ | | | | | | |
| 16. LOANS RECEIVED THIS REPORTING PERIOD | \$ | | | | | | |
| 17. INTEREST RECEIVED THIS REPORTING PERIOD | \$ <u>585</u> | | | | | | |
| 18. TOTAL RECEIPTS (add 15.c., 16., and 17.) (must be shown in item 12.b.) | \$ <u>585</u> | | | | | | |
| DISBURSEMENTS | | | | | | | |
| 19. EXPENDITURES (other than loan payments) | | | | | | | |
| a. Expenditures (\$100 or less each payee this period) (must be listed by category - e | .g., printing, postage, gasoline) | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | | | | | | | |
| \$ | - Control of the Cont | | | | | | |
| \$ | | | | | | | |
| Total of Expenditures (\$100 or less each payee) | \$ | | | | | | |
| b. Itemized Expenditures (Over \$100 each payee this period) | | | | | | | |
| c. TOTAL EXPENDITURES (other than loan repayments)(add 19.a. and 19.b.) | | | | | | | |
| 20. LOAN REPAYMENTS MADE THIS PERIOD | | | | | | | |
| 21. TOTAL DISBURSEMENTS (add 19.c. and 20.) (must be shown in item 12.c.) | | | | | | | |
| 22.IN-KIND CONTRIBUTIONS | | | | | | | |
| Unitemized in-kind contributions (\$100 or less from each source this period)\$ | | | | | | | |
| . Itemized in-kind contributions (over \$100 from each source this period)\$ | | | | | | | |
| c. TOTAL IN-KIND CONTRIBUTIONS RECEIVED THIS PERIOD (add 22.a. and 22.b.)\$ | | | | | | | |
| 23. OBLIGATIONS | | | | | | | |
| a. Unitemized Obligations Outstanding (\$100 or less each)\$\$ | | | | | | | |
| b. Itemized Obligations Outstanding (Over \$100 each)\$ | | | | | | | |
| c. TOTAL OBLIGATIONS OUTSTANDING (add 23.a. and 23.b.) (must be shown i item 12.f.)\$ | | | | | | | |



SS-1133 (Rev. 4/02)

ITEMIZED STATEMENT OF LOANS - CANDIDATE

| 1. NAME OF CANDIDATE OR COM | MITTEE | | | ************************************** | | | 2. F | REPORT C | OVERI | NG THE PERIOD |
|---|----------------------------------|---------------|-------------------|--|--|---------------------------------|-----------------|----------|---|---------------------|
| | | | | | | | FROM: TO | | | |
| 3. COMPLETE THE APPROPRIATE ITEMS FOR EACH ITEMIZED LOAN (loans totaling more than \$100 from any source during the period) | | | | | | | | | | |
| Complete the Following for the Source of the Loan | | | | | | | | | | |
| First Name | Middle Name | 9 | | Outstanding L | | Loans Received | | an | | anding Loan Balance |
| Last Name/Organization Name | CARL Last Name/Organization Name | | | (Beginning of Period) | | Received | ed Payments | | (End of Period) | |
| Address 3628 GLENDON DA City CHATANOGA TN 37403 | | | | 25,000 | | | | 2 | 25,000 | |
| 3628 GLENDON | DA | <u>_</u> | | | oan Received For: □ Primary Election □ General Election | | | | | |
| City | HATANOGA State Zip Code TN 37403 | | | □ Runoff (Local Elections Only) | | | | | | |
| CHRI HIVOOUT | ist All Endors | sers or Guara | | | | | please attach | a page) | | |
| First Name Middle Name | | | | | First Name Middle Name | | | | | |
| Last Name/Organization Name | | | | Last Name/Organization Name | | | | | | |
| Address | | | | | Address | | | | | |
| City | State Zip Co | | | ode | City State Zip Code | | | | | Zip Code |
| Amount Guaranteed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | |
| First Name Middle Name | | | | First Name Middle Name | | | | | Name | |
| Last Name/Organization Name | | | | ************************************** | Last Name/Organization Name | | | | | |
| Address | | | | | Address | | | | | |
| City | | State | Zip C | ode | City | | | | State | Zip Code |
| Amount Guaranteed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | |
| First Name Middle Name | | | | | First Name Middle Name | | | | Name | |
| Last Name/Organization Name | | | | | Last Name/Organization Name | | | | | |
| Address | | | | 4.00.000 | Address | | | | | |
| City | | State | Zip C | ode | City | | Angerty Control | | State | Zip Code |
| Amount Guaranteed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | |
| First Name | | Middle Name |) | | First Name Middle Name | | | | | Name |
| Last Name/Organization Name | | | | | Last Name/Organization Name | | | | | 1/4/2 |
| Address | | | | | Address | | | | | |
| City | State Z | | | Code | City State | | | | Zip Code | |
| Amount Guaranteed Outstanding | | | | | Amount Guaranteed Outstanding | | | | | |
| 4. Totals for all Loans (complete on last page of itemized loans) (Total loans received should also be shown in item 16, on summary page.) (Total loan payments should also be shown in item 20, on summary page.) (Total outstanding loan balance should also be shown in item 12.e. on front page.) | | | 100 00 XXXXXXXXXX | | Loan Balance of Period) | Loans Loan Received Payments | | | Outstanding Loan Balance (End of Period) | |
| | | | | 25 | 000 | _ | _ | | 25,000 | |
| SS-1132 (Rev. 4/02) | | | | | | F | age 3 | of3 | ñ | RDA 1159 |